PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
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## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		0103-0021(ZM0538)				
First Inventor		Cook et al.				
Title	Locking Surgical Instrument					

(Only for new nonprovisional applications	Express M	Mail Label No.	ER 036	6454	98 US		
APPLICATION ELEN	MENTS	ADDRESS TO: Assistant Commissioner for F					
See MPEP chapter 600 concerning utility p		ADDRESS TO: Box Patent Application Washington, DC 20231					
1. Fee Transmittal Form (e.g., PTO (Submit an original and a duplicate for fee proc. Applicant claims small entity stat See 37 CFR 1.27.  3. Specification [Total (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related A - Statement Regarding Fed spotence (isting, or a computer program listing - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawing - Detailed Description - Claim(s) - Abstract of the Disclosure  4. Drawing(s) (35 U.S.C. 113) [ 5. Oath or Declaration [Invention of Copy from a prior application of the prior app	c	Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s))  10. 37 CFR 3.73(b) Statement (when there is an assignee)  11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.					
Prior application information: Examiner:  For CONTINUATION OR DIVISIONAL APPS on		he prior applica	•	Unit:an eath or dec	laration	is supplied under	
Box 5b, is considered a part of the disclosure The incorporation can only be relied upon who	of the accompanying contin	uation or divisi	onal application a	nd is hereby i	ncorpor		
	19. CORRESPOND	ENCE ADDRE	ESS				
Customer Number:	34086		or Correspondence address below				
Name							
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City		State		Zip (	Code		
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Name (Print/Type) Cary R. R	eeyes)	Registr	ration No. (Atto	rney/Agent)		35,334	
Signature ( )	KReeves					Date 08/05/2003	

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PTO/SB/17 (05-03) Approved for use through 04/30/2003. OMB 0651-0032

Complete if Known

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E RANSMITTA	L A	pplication Number	Concurrent					
	Fi	ling Date	Concurrent					
for FY 2003	Fi	rst Named Inventor	Cook et al.					
Effective 01/01/2003. Patent fees are subject to annual revision.	E)	Examiner Name						
Applicant claims small entity status. See 37 CFR 1.27	Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 790		Attorney Docket No. 0103-0021(ZM0538)						
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
Check Credit card Money Other None	3. ADDITIONAL FEES							
Deposit Account:		Large Entity   Small Entity  Fee Fee   Fee Fee   Fee Fee   Fee Fee   Fee Fee						
Deposit	Code (\$)							
Account Number 26-0262	1051 13	0 2051 65 Surchar	2051 65 Surcharge - late filing fee or oath					
Deposit Account Zimmer, Inc.	1052 5	0 2052 25 Surchar	Surcharge - late provisional filing fee or cover sheet					
Name	1053 13	í .	1053 130 Non-English specification					
The director is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit any overpayments	1812 2,52	1812 2,520 For fili	ing a request for ex parte reexamination	<b>  </b>				
Charge any additional fee(s) during the pendency of this application	1804 92		sting publication of SIR prior to niner action					
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805 1,84	0* 1805 1,840* Requ	esting publication of SIR after niner action					
FEE CALCULATION	1251 11	0 2251 55 Extension	55 Extension for reply within first month					
1. BASIC FILING FEE	1252 41	0 2252 205 Extensi	2252 205 Extension for reply within second month					
Large Entity Small Entity	1253 93	0 2253 465 Extens	ion for reply within third month					
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,45	0 2254 725 Extens	ion for reply within fourth month					
1001 750 2001 375 Utility filing fee 750	1255 1,97	70 2255 985 Extens	sion for reply within fifth month					
1002 330 2002 165 Design filing fee	1401 32	2401 160 Notice	e of Appeal					
1003 520 2003 260 Plant filing fee	1402 32	0 2402 160 Filing a	brief in support of an appeal					
1004 750 2004 375 Reissue filing fee	1403 28	0 2403 140 Reque	est for oral hearing					
1005 160 2005 80 Provisional filing fee	1451 1,51		1451 1,510 Petition to institute a public use proceeding					
SUBTOTAL(I) (\$) 750	1452 11		55 Petition to revive - unavoidable					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,30		0 Petition to revive - unintentional					
Extra Claims Fee from Fee Paid	1501 1,30		issue fee (or reissue)	<b>├</b> ──				
Total Claims $19$ -20- = $0$ x $18$ $0$	1 .002			<b>  </b>				
Independent $3 - 3 = 0$ v 84 0	1503 63 1460 13	1	issueree is to the Commissioner					
Claims Multiple Dependent	l	j		<b></b>				
Large Entity   Small Entity	1807 5	ł	sing fee under 37 CFR 1.17(q)	<del>  </del>				
Fee Fee Fee Fee Description	1806 18	1	sion of Information Disclosure Stmt					
Code (\$)   Code (\$)   1202 18   2202 9 Claims in excess of 20	8021 4	prop	ing each patent assignment per erty (times number of properties)	40				
1201 84 2201 42 Independent claims in excess of 3	1809 75		submission after final rejection FR 1, 1 29(a))	] ]				
1203 280 2203 140 Multiple dependent claim, if not paid	1810 75	1	(37 CFR 1. 1 29(a))  2810 375 For each additional invention to be					
1204 84 2204 42 ** Reissue independent claims	]	exan	examined (37 CFR 1.129(b))					
over original patent	1801 75		st for Continued Examination (RCE)					
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 90	1802 900   1802 900 Request for expedited examination of a design application						
SUBTOTAL (2) (\$) 0	Other fee	(specify)						
**or number previously paid, if greater; For Reissues, see above	* Reduce	d by Basic Filing Fee Pa	id SUBTOTAL (3) \$ 40					
SUBMITTED BY (Complete (if applicable)								
Name (Print/Type) Cary R. Reeves (1) Registration No. (Attornev/Agent) 35,334 Telephone 817-594-5994								
Signature Keeves	IVIIO	monngent 00,004	Date August 5 2					

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